Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0970372	CURTIS PACKAGING				NTNC	180	Р	GW
Local Address (v	where applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
44 BERKSHIRE R	OAD	Connections	1					

Towns Served: NEWTOWN	D		
	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	500)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT - HILL WELL (WSF ID: 0	00701)		
Inorganic Chemicals (IOCS)			(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - HILL WELL (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - HILL WELL (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - HILL WELL (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
EP - HILL WELL (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	<u> </u>							
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
СТ0970372	CURTIS PACKAGING				NTNC	180	Р	GW
Local Address (	where applicable)	Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
44 BERKSHIRE I	ROAD	Connections	1					

Towns Served: NEWTOWN

Other Co	ompliance Schedules		
Compliance Schedule Activity	Due Date	Achieved Date	
CROSS CONNECTION SURVEY REPORT	3/1/2020		

	Wate	r System Facili	ty and Sampling P	oint Ir	nventor	У		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	age DBPR
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		GWS001	MENS SHOP BATH	Α	Υ	2	Υ	
		GWS002	WOMENS SHOP BATH	Α	Υ	2		
		GWS003	LOWER OFFICE BATH	Α	Υ	2		
		GWS004	UPPER MENS BATH	Α	Υ	2		
		GWS005	UPPER WOMENS BATH	Α	Υ	2		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00701	ENTRY POINT - HILL WELL	3	EP - HILL WELL	Α				
54284	BLADDER STORAGE TANKS							
55537	HILL WELL	2	HILL WELL	Α				

			Co	ontact Inf	ormation				
Name				Organization	1			Job Title	
Mr. Donald R. Drop	po, Jr			Curtis Packa	ging		Owner		
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
44 Berkshire Road						Sandy H	ook	СТ	06482
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ac	ldress		
203-426-5861		203-426-2	2684		203-264-9795	dondroppo@curtispackaging.com			n
Contact Role(s): Le	gal Contact, C	Owner							
Name				Organization	1			Job Title	

Contact Role(s): L	egal Contact, (	Owner							
Name				Organization	า	Job Title			
Mr. Pam Michel				Curtis Packa	ging	Env. Manager			
Mailing Address Lir	ne One		Mailing Add	dress Line Two			City	State	Zip Code
44 Berkshire Road						Sandy H	ook	СТ	06482
Business Phone	Extension	Fax	N	Nobile Phone	Emergency Phone	Email Address			
203-426-5861		203-426-2	2684			pmichel@curtispackaging.com			
					<del>'</del>				

Contact Role(s): Administrative Contact

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name			Cla	ssification	Population	Owner Type	Primary Source	
CT0970462	HOUSATONIC VALLEY WALDORF SCHOOL ECO	C-RED			NTNC	55	Р	GW
Local Address (v	vhere applicable)	Service	Resider	itial	Commerci	al Industri	al Combine	ed Agricultural
40 DODGINGTO	WN ROAD	Connections	1					

Towns Served: NEWTOWN			
Monitoria	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		

	Conne	cticut Dep	artment of	Public H	lealth	Drink	ing W	ater So	ection	
		Water Qua	ality Monit	oring an	d Com	pliand	e Sch	edule		
PWS ID	PWS Name	2				Classificat	ion Pop	ulation Ov	ner Type Pi	rimary Source
СТ0970462	2 HOUSATO	NIC VALLEY WAL	DORF SCHOOL EC	C-RED		NTNC		55	Р	GW
Local Addre	ess (where applic	cable)		Service	Resident	ial Comm	nercial	Industrial	Combined	Agricultura
	NGTOWN ROAD			Connections	1					
Towns Serv	ved: NEWTOWN									
			Monito	oring Requ	iiremer	nts				
Water Sys	stem Facility: I	ENTRY POINT (	WSF ID: 00700)							
Organic C	Chemicals (VO	CS)						1 routin	e (RT) per t	three years
Samp	ling Point (Samp	ling Point ID)			Monitorin	ng Period	Collec	ction Period	l Compli	ance Status
ENTR\	Y POINT (3)				1/1/17 - 1	12/31/19			Co	mplete
					1/1/20 - 1	12/31/22				
	Mon	thly Water	System Facili	ity (WSF) I	evel M	lonitori	ing Re	quireme	ents	
Water Sys	stem Facility: <b>E</b>	NTRY POINT (	WSFID: 00700)							
Analyte	е	<b>Monitoring Req</b>	uirement (Summa	ary Type)	Oper	ating Limi	t		Samples Re	eq/Month
рН		Entry Point pH N	Monitoring (PHRD	)	Mini	mum: 7 Pl	Н		4	
Start Da	ate: 1/1/2015			Complia	nce Histo	ry:	Operat	ting Limit	Monitor	ing
				Monitor	ing Period	b	Compl	iance Statu	s: Complia	nce Status:
					18 - 11/30					N
					18 - 12/31					N
					9 - 1/31/2					N
					9 - 2/28/2					N
					9 - 3/31/2					
					9 - 4/30/2					
			Other Co	ompliance	Sched	ules				
•	e Schedule Activ	-				Due Date		Achieved	Date	
CROSS CON	NNECTION SURVE	EY REPORT			3	3/1/2019				
		Water 9	System Facili	ty and Sar	mpling	Point Ir	nvento	ory		
Water							Total	Lead and	1	
-	Water System Fo	acility	Sampling Point		nt		Coliforn			Stage
Facility ID			ID	Description		Status		Rule Tie	r Asbestos	WQP 2 DBP
00600	DISTRIBUTION S'	YSTEM	4	DISTRIBUTION		Α	Υ			
			DOWNSTREAM							
			UPSTREAM	WITHIN 5 SER						
	ENTRY POINT		3	ENTRY POINT		Α				
	WELL		2	WELL		Α				
	WATER TREATM									
	ATMOSPHERIC T									
	BOOSTER PUMP									
56526	PRESSURE TANK									

 Operator Name
 Operator Type
 Certification(s)
 Expiration

 FOLEY, JAMES
 CHIEF OPERATOR
 WATER TREATMENT PLANT OPERATOR - CLASS II
 3/31/2020

**Certification** 

**Certified Operator Information** 

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM

	Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name		Classification		Population	Owner Type	Primary Source			
СТ0970462	CT0970462 HOUSATONIC VALLEY WALDORF SCHOOL ECC-RED					55	Р	GW		
Local Address	Local Address (where applicable)				Commerci	al Industri	al Combine	ed Agricultural		
40 DODGINGT	OWN ROAD	Connections	1							

Connecticut Department of Public Health Drinking Water Section

Towns Served: NEWTOWN

				Contact ini	ormation					
Name				Organization	1			Job Title		
Mr. David Freedma	ın			Waldorf Sch	ool		Treasurer			
Mailing Address Line One			Mailing Address Line Two				City	State	Zip Code	
40 Dodgingtown Road				ı		'n	СТ	06470		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress			
203-364-1113										
Contact Role(s): Le	egal Contact		·							
Name				Organization	1		Job Title			
Mr. David Demmer	nt			Housatonic \	Valley Waldrof Schl		Facilities M	anager		
Mailing Address Lin	e One		Mailing	Address Line Two		City		State	Zip Code	
40 Dodgingtown Ro	ad					Newtow	'n	СТ	06470	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ldress			
203-364-1113	105	203-364-	0630			ddemme	ent@waldor	fct.org		
Contact Dala/al.	d	Cambaat			1	1				

Contact Role(s): Administrative Contact

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name Cla				Cla	ssification	Population	Owner Type	Primary Source
CT0975033 HEAD O MEADOW ELEMENTARY SCHOOL					NTNC	506	L	GW
Local Address (v	Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural	
94 BOGGS HILL	Connections	1						

· · · · · · · · · · · · · · · · · · ·	<u>'</u>	
Requirements		
0)		
	1 rout	ine (RT) per quarter
<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
10/1/18 - 12/31/18		Complete
1/1/19 - 3/31/19		Complete
	1 routine	(RT) per nine years
<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
1/1/11 - 12/31/19		
1/1/20 - 12/31/28		
	1 rout	ine (RT) per quarter
<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
10/1/18 - 12/31/18		Complete
1/1/19 - 3/31/19		Complete
4/1/19 - 6/30/19		
7/1/19 - 9/30/19		
	1 re	outine (RT) per year
<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
1/1/18 - 12/31/18	8/1-8/31	Complete
1/1/19 - 12/31/19	8/1-8/31	
1/1/20 - 12/31/20	8/1-8/31	
	10 routine	(RT) per three years
<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
1/1/16 - 12/31/18	6/1-9/30	
1/1/19 - 12/31/21	6/1-9/30	
1/1/22 - 12/31/24	6/1-9/30	
	1 rout	ine (RT) per quarter
<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
10/1/18 - 12/31/18		Complete
1/1/19 - 3/31/19		Complete
4/1/19 - 6/30/19		
7/1/19 - 9/30/19		
	1 routine	(RT) per three years
<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
1/1/18 - 12/31/20		
1/1/21 - 12/31/23		
	1 re	outine (RT) per year
Monitoring Period	Collection Period	Compliance Status
		Complete
1/1/10 - 12/31/10		
1/1/19 - 12/31/19		Jop.ictc
	10/1/18 - 12/31/18 1/1/19 - 3/31/19  Monitoring Period 1/1/11 - 12/31/19 1/1/20 - 12/31/28  Monitoring Period 10/1/18 - 12/31/18 1/1/19 - 6/30/19 7/1/19 - 9/30/19  Monitoring Period 1/1/18 - 12/31/18 1/1/19 - 12/31/19 1/1/20 - 12/31/20  Monitoring Period 1/1/16 - 12/31/18 1/1/19 - 12/31/21 1/1/22 - 12/31/24  Monitoring Period 10/1/18 - 12/31/18 1/1/19 - 3/31/19 4/1/19 - 6/30/19 7/1/19 - 9/30/19  Monitoring Period 1/1/18 - 12/31/20 1/1/21 - 12/31/23  Monitoring Period	Monitoring Period  10/1/18 - 12/31/18  1/1/19 - 3/31/19  1 routine  Monitoring Period  1/1/11 - 12/31/19  1/1/20 - 12/31/28  1 rout  Monitoring Period  10/1/18 - 12/31/18  1/1/19 - 3/31/19  4/1/19 - 6/30/19  7/1/19 - 9/30/19  1 routine  Monitoring Period  1/1/18 - 12/31/18  1/1/19 - 12/31/18  1/1/19 - 12/31/19  4/1/19 - 12/31/19  1/1/20 - 12/31/20  1/1/16 - 12/31/18  1/1/19 - 12/31/18  1/1/19 - 12/31/18  1/1/19 - 12/31/18  1/1/19 - 12/31/18  1/1/19 - 12/31/18  1/1/19 - 12/31/18  1/1/19 - 3/31/19  4/1/19 - 6/30/19  7/1/19 - 9/30/19  1 routine  Monitoring Period  10/1/18 - 12/31/18  1/1/19 - 3/31/19  4/1/19 - 6/30/19  7/1/19 - 9/30/19  1 routine  Monitoring Period  Collection Period  10/1/18 - 12/31/18  1/1/19 - 3/31/19  4/1/19 - 6/30/19  7/1/19 - 9/30/19  1 routine  Collection Period  Collection Period  1/1/18 - 12/31/20  1/1/12 - 12/31/23

Page 6 Schedule Generation Date: 4/11/2019

		CD 111 II	1.1 D	. 1.	<b>YAY</b>	. 0	
C	onnecticut Department of						ection
	Water Quality Monit	coring and					
PWS ID P	WS Name		Cla	ssificatio	on Popul	ation Ov	vner Type Primary Sour
СТ0975033 Н	EAD O MEADOW ELEMENTARY SCHOOL			NTNC	50	6	L GW
Local Address (wh	ere applicable)	Service	Residential	Comme	ercial Ind	dustrial	Combined Agricultur
94 BOGGS HILL RO	AD	Connections	1				
Towns Served: NE	WTOWN						
	Monit	oring Requ	irements	S			
Water System Fa	icility: ENTRY POINT (WSF ID: 00700)						
Pesticides, Herb	icides and PCBs-Phase II (SOC2)					1 routir	ne (RT) per three year
Sampling Poi	nt (Sampling Point ID)	ı	Monitoring I	Period	Collection	on Period	d Compliance Status
ENTRY POINT	(3)		1/1/17 - 12/	31/19			
			1/1/20 - 12/	31/22			
Pesticides, Herb	vicides and PCBs-Phase V (SOC5)					1 routir	ne (RT) per three year
Sampling Poi	nt (Sampling Point ID)	I	Monitoring I	Period	Collection	on Period	d Compliance Status
ENTRY POINT	(3)		1/1/17 - 12/	31/19			
			1/1/20 - 12/	31/22			
Organic Chemic	als (VOCS)					1 routir	ne (RT) per three year
_	nt (Sampling Point ID)	1	Monitoring I	Period		on Period	
ENTRY POINT	(3)		1/1/17 - 12/	31/19			·
	.,						
Water System Fa	icility: WELL #3 (WSF ID: 10471)						
E. Coli (3014)						1 ro	utine (RT) per quarte
Sampling Poi	nt (Sampling Point ID)	ı	Monitoring I	Period	Collection	on Period	d Compliance Status
WELL (2)		1	0/1/18 - 12,	/31/18			Complete
			1/1/19 - 3/3	31/19			Complete
			4/1/19 - 6/3	30/19			
			7/1/19 - 9/3	30/19			
Water System Fa	icility: WELL #4 (WSF ID: 10472)						
E. Coli (3014)	,					1 ro	outine (RT) per quarte
	nt (Sampling Point ID)	1	Monitoring I	Period	Collection	on Period	
WELL 1 (2)	- ( F 3 )		0/1/18 - 12/				Complete
. /			1/1/19 - 3/3	-			Complete
			4/1/19 - 6/3				
			7/1/19 - 9/3	-			
	Monthly Water System Facil	lity (WSF) I			ng Regi	uireme	ents
Water System Fa	icility: ENTRY POINT (WSFID: 00700)	, (, _			.8		
Analyte	Monitoring Requirement (Summ	ary Type)	Operati	ng Limit			Samples Req/Month
Chlorine	Entry Point Chlorine Residual Mo		-	m: 0.2 N			Daily
Start Date: 8/	•	• • •	nce History:		-	a Limit	Monitoring
0/	,		ng Period		Operatin Compliar	_	
			.8 - 11/30/2	018	Compilar	.cc Statu	N

12/1/2018 - 12/31/2018

1/1/2019 - 1/31/2019

2/1/2019 - 2/28/2019 3/1/2019 - 3/31/2019 4/1/2019 - 4/30/2019 Ν

Ν

# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

	<u> </u>							
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
СТ0975033	HEAD O MEADOW ELEMENTARY SCHOOL				NTNC	506	L	GW
Local Address (v	vhere applicable)	Service	Resider	itial	Commerci	al Industri	al Combine	ed Agricultural
94 BOGGS HILL	ROAD	Connections	1					

Towns Served: NEWTOWN

Other C	Compliance Schedules		
Compliance Schedule Activity	Due Date	Achieved Date	
CROSS CONNECTION SURVEY REPORT	3/1/2020		

CNO33 CC	INNECTION SURVEY REPORT		,	1/2020				
	Water S	ystem Facili	ty and Sampling P	oint In	ventor	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		HOM001	K HAND SINK	Α	Υ	1		
		HOM002	K TRPL SINK L	Α	Υ	1		
		HOM003	K TRPL SINK M	Α	Υ	1		
		HOM004	K TRPL SINK R	Α	Υ	1		
		HOM005	WF CAF	Α	Υ	1		
		HOM006	NURSES SINK	Α	Υ	1		
		HOM007	WF BY NURSES OFF	Α	Υ	1		
		HOM008	FAC RM SINK	Α	Υ	1		
		HOM009	WF BY GYM	Α	Υ	1		
		HOM010	CRWF RM 318	Α	Υ	1		
		HOM011	CRWF RM 406	Α	Υ	1		
		HOM012	CRWF RM 212	Α	Υ	1		
		HOM013	G RM R SINK RM 410	Α	Υ	1		
		HOM014	G RM L SINK RM 410	Α	Υ	1		
		HOM015	CRS RM 401A	Α	Υ	1		
		HOM016	CRS RM 403	Α	Υ	1		
		HOM017	PRINC OFFICE	Α	Υ	1		
		HOM018	RM 401 HALL SINK	Α	Υ	1		
		HOM019	MATH/SCI AREA	Α	Υ	1		
		HOM020	CRS RM 415	Α	Υ	1		Υ
		HOM021	BOILER ROOM 127	Α	Υ	1	Υ	
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10471	WELL #3	2	WELL	Α				
10472	WELL #4	2	WELL 1	Α				
1407	HEAD O MEADOW TREATMENT PLANT							
54286	ATMOSPHERIC STORAGE							
54288	HYDROPNEUMATIC STORAGE							
59071	PUMP FACILITY							

	Water Quality Monitoring and Compliance Schedule							
PWS ID PWS Name Classification Population Owner Type Primary So								Primary Source
СТ0975033	HEAD O MEADOW ELEMENTARY SCHOOL			NTNC	506	L	GW	
Local Address (v	ocal Address (where applicable) Service Res					al Industri	al Combine	ed Agricultural
94 BOGGS HILL I	ROAD	1						

Connecticut Department of Public Health Drinking Water Section

Towns Served: NEWTOWN

Water System Facility Facility Classification:	ty: HEAD	0.0454.000			or Information					
-	-	O MIEADON	V TREATIV	IENT PLANT (	(WSF ID: 1407)					
Onovertor News	CLASS 1 TR	EATMENT P	_ANT						Certificatio	
Operator Name			Operator	Туре	Certification(s)		Expiration			
GRANT, SHANE			CHIEF OPE	RATOR	WATER TREATMEN	IT PLANT (	)PERATOR -	- CLASS II	9/30/202	
					DISTRIBUTION SYS	ΓΕΜ OPER	ATOR - CLA	SS II	9/30/2020	
				Contact Inf	ormation					
Name				Organization	1			Job Title		
Mr. Gino Faiella				Newtown Pu	ıblic Schools		Dir of Facili	ties		
Mailing Address Line C		Mailing Address Line Two				City	State	Zip Code		
94 Boggs Hill Road						Newtown	1	СТ	06470	
Business Phone	Extension	Fax	ľ	Mobile Phone	Emergency Phone	Email Add	dress			
203-426-7615		203-270-0	)478	914-316-4490	203-948-3332	faiellag@newtown.k12.ct.us				
Contact Role(s): Adm	ninistrative (	Contact								
Name				Organization	1			Job Title		
Mr. Daniel Rosenthal				Town of New	vtown		First Selecti	man		
Mailing Address Line C		Mailing Ad	dress Line Two			City	State	Zip Code		
Newtown Municipal Center			3 Primrose Street			Newtown CT		СТ	06470	
Business Phone 8	Extension	Fax	l	Mobile Phone	Emergency Phone	Email Add	dress			

#### Please note the following:

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department of Public Health Drinking Water Section									
	Water Quality Monitoring and Compliance Schedule									
S ID	PWS Name	Classification	Population	Owner Type	Primary Source					
975073	EVERSOURCE - NEWTOWN AREA WORK CENTER	NTNC	145	Р	GW					

**CT09** Local Address (where applicable) Service Residential Commercial Industrial Combined Agricultural Connections 20 BARNABAS ROAD 1

PWS

Towns Served: NEWTOWN			·
Monitoring Re	equirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/20	6/1-9/30	
	1/1/21 - 12/31/23	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/18 - 12/31/20		Complete
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
WELL (2)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule												
PWS ID	PWS Name		Classification		Population	Owner Type	Prima	ry Source					
СТ0975073	EVERSOURCE - NEWTOWN AREA WORK CEN	ITER			NTNC	145	Р	(	GW				
Local Address (	where applicable)	Service	Residentia		Commerci	al Industri	al Combin	ed Ag	gricultural				
20 BARNABAS I	ROAD	Connections	1										

Towns Served: NEWTOWN

Contact Role(s): Legal Contact

Other Compliance Schedules										
Compliance Schedule Activity	Due Date	Achieved Date								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2017		_							
CROSS CONNECTION EXEMPTION	3/1/2022									

	Water System Facility and Sampling Point Inventory												
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		age DBPR				
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ								
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α									
		NU001	LUNCH ROOM	Р	Υ	1							
		NU002	MAIL ROOM	Р	Υ	1							
		NU003	M ROOM SINK 1	Р	Υ	1							
		NU004	M ROOM SINK 2	Р	Υ	1							
		NU005	M ROOM SINK 3	Р	Υ	1							
		NU006	L ROOM SINK 1	Р	Υ	1							
		NU007	L ROOM SINK 2	Р	Υ	1							
		UPSTREAM	WITHIN 5 SERVICE CON	Α									
00700	ENTRY POINT	3	ENTRY POINT	Α									
10474	WELL	2	WELL	Α		·							

### **Certified Operator Information**

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTE	М		Certification
Operator Name	Operator Type	Certification(s)	Expiration
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2020

Operator Name			Operator	Туре	Certification(s)				Expiration
FOLEY, JAMES			CHIEF OPER	RATOR	WATER TREATMEN	IT PLANT	OPERATOR -	- CLASS II	3/31/2020
			C	Contact Inf	ormation				
Name				Organization	1			Job Title	
Mrs. Ellen K. Angley				Eversource E	nergy		Vice Preside	ent	
Mailing Address Line One			Mailing Add	dress Line Two			City	State	Zip Code
One Nstar Way						Westwo	od	MA	02090
Business Phone	Extension	Fax	N	Nobile Phone	Emergency Phone	Email Address			
781-441-8006		781-441-	3086			ellen.an	gley@everso	ource.com	
Contact Role(s): Lo	egal Contact								
Name				Organization	1			Job Title	
Mr. Kenneth A. Hy	nes			Eversource E	nergy		Supervisor		
Mailing Address Lin	ne One		Mailing Add	dress Line Two		City		State	Zip Code
34 Hopmeadow Str	4 Hopmeadow Street					Simsbur	у	СТ	06070
Business Phone	Extension	Fax	N	Nobile Phone	Emergency Phone	Email Address			
860-651-2553		860-651-	2567		860-250-1926	kenneth	.hvnes@nu.	com	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

C	omiecuc	ut Depa	ı une	IIL OI	Public	пеани	וווע	IKIIIE	g water	sec	Cuon	
	Wa	ter Qua	lity M	lonite	oring a	nd Con	nplia	nce S	Schedu	le		
PWS ID P	WS Name				Classific		ication	Population	Own	er Type F	rimary Source	
CT0975073 E	VERSOURCE -	NEWTOWN	AREA WO	ORK CEN	ITER		NT	NC	145		Р	GW
Local Address (wh	ere applicable)				Service Resider		itial Co	mmerci	ial Industr	rial (	Combined	Agricultural
20 BARNABAS ROA	AD.				Connection	15 1						
Towns Served: NE	WTOWN					·						·
Name				Or	ganization						Job Title	
Eversource Energy												
Mailing Address Line One Mailing Addre				Address	Line Two				City		State	Zip Code
20 Barnabus Road					Newtov			wn		СТ	06470	
<b>Business Phone</b>	Extension	Fax		Mobile Phor		Emergency Phone		Email A	Address			
860-270-5868												
Contact Role(s):	Owner											
Name				Or	ganization						Job Title	
Ms. Rebecca L. Ro	berts								Asso Env	rmntl	Spclst	
Mailing Address Li	ne One		Mailing	Address	Line Two				City		State	Zip Code
107 Selden S				den Stre	treet			Berlin		СТ	06037	
<b>Business Phone</b>	Extension	Fax		Mobil	e Phone	Emergency	/ Phone	Email A	Email Address			
860-665-3285								rebecc	a.roberts@	everso	ource.com	1

Connecticut Department of Public Health Drinking Water Costion

Contact Role(s): Administrative Contact

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

### Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
СТ0979113	ROCKY GLEN MILL				NTNC	70	Р	GW
Local Address (where applicable)		Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
75 GLEN ROAD		Connections	6					

Towns Served: NEWTOWN						
Monitoring	Requirements					
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)					
Chlorine Residual (0999)		1 routine (RT) per quar				
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>			
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete			
	1/1/19 - 3/31/19		Complete			
Asbestos (1094)		1 routine	(RT) per nine years			
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>			
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete			
	1/1/20 - 12/31/28					
Total Coliform (3100)		1 rout	ine (RT) per quarter			
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status			
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete			
	1/1/19 - 3/31/19		Complete			
	4/1/19 - 6/30/19					
	7/1/19 - 9/30/19					
Disinfectant Byproducts - TTHM & HAA5 (DBP)		1 r	outine (RT) per year			
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>			
THIRD FLOOR LADIES (TCRLC005)	1/1/18 - 12/31/18	8/1-8/31	Complete			
	1/1/19 - 12/31/19	8/1-8/31				
	1/1/20 - 12/31/20	8/1-8/31				
Lead And Copper (PBCU)		5 r	outine (RT) per year			
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status			
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete			
	1/1/19 - 12/31/19	6/1-9/30				
	1/1/20 - 12/31/20	6/1-9/30				
Physical Parameters (PPS)		1 rout	ine (RT) per quarter			
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>			
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete			
	1/1/19 - 3/31/19		Complete			
	4/1/19 - 6/30/19					
	7/1/19 - 9/30/19					
Water System Facility: ENTRY POINT (WSF ID: 00700)						
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years			
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>			
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete			
	1/1/20 - 12/31/22					
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year			
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status			
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete			
	1/1/19 - 12/31/19		Complete			
	1/1/20 - 12/31/20					

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Conn	acticut Donartmant of	Dublia II	oolth D	nin lei:	na V	Vator	Coat	ion	
Conne	ecticut Department of							1011	
DIAIC N	Water Quality Monit	oring and						<b>T</b> 5	
PWS ID PWS Nan			Cla		on Po			Type Pr	imary Sourc
	LEN MILL			NTNC		70	P		GW
Local Address (where app	licable)	Service Connections	Residential	Comme	ercial	Industria	I Co	mbined	Agricultura
75 GLEN ROAD		Connections	6						
Towns Served: NEWTOWN		- win - D							
Water System Facility:	ENTRY POINT (WSF ID: 00700)	oring Requi	rements	•					
	and PCBs-Phase II (SOC2)					1 rout	tine (R	T) ner t	hree years
Sampling Point (Sam	•	^	Monitoring I	Period	Colle	ction Peri	-		ance Status
ENTRY POINT (3)	,g		L/1/17 - 12/						
			L/1/20 - 12/						
Pesticides, Herbicides	and PCBs-Phase V (SOC5)					1 rout	tine (R	T) per t	hree years
Sampling Point (Sam		/	Monitoring I	Period	Colle	ection Peri	-		ance Status
ENTRY POINT (3)		1	L/1/17 - 12/	31/19				Coi	mplete
		1	1/1/20 - 12/	31/22					
Organic Chemicals (VC	OCS)					1	routin	e (RT) p	er quarter
Sampling Point (Sam	pling Point ID)	/	Monitoring I	Period	Colle	ection Peri	iod	Compli	ance Status
ENTRY POINT (3)		1	0/1/18 - 12/	31/18				Coi	mplete
			1/1/19 - 3/3	1/19				Coi	mplete
			4/1/19 - 6/3	0/19					
			7/1/19 - 9/3	0/19					
Water System Facility:	WELL (WSF ID: 10477)								
E. Coli (3014)						1	routin	e (RT) p	er quarter
Sampling Point (Sam	pling Point ID)	/	Monitoring I	Period	Colle	ection Peri	iod	Compli	ance Status
WELL (2)			0/1/18 - 12/						mplete
			1/1/19 - 3/3					Coi	mplete
			4/1/19 - 6/3						
			7/1/19 - 9/3	0/19					
Water System Facility:	WELL #2 (WSF ID: 51587)								
E. Coli (3014)									er quarter
Sampling Point (Sam	pling Point ID)		Monitoring I		Colle	ection Peri	iod		ance Status
WELL 2 (2)			0/1/18 - 12/						mplete
			1/1/19 - 3/3		_			Coi	mplete
			4/1/19 - 6/3	-					
			7/1/19 - 9/3						
Мо	nthly Water System Facil	ity (WSF) L	evel Mo	nitorir	ng Re	equiren	nent	S	
Water System Facility:	ENTRY POINT (WSFID: 00700)								
Analyte	Monitoring Requirement (Summa	ary Type)	Operati	ng Limit			Sar	nples Re	eq/Month
Chlorine	Entry Point Chlorine Residual Mor	nitoring (CHLR)	Minimu	m: 0.2 N	∕IG/L			Dai	ly
<b>Start Date:</b> 3/1/2006		Complia	nce History:		Opera	ating Limit	t 1	Monitor	ing

**Monitoring Period** 

11/1/2018 - 11/30/2018 12/1/2018 - 12/31/2018 1/1/2019 - 1/31/2019

2/1/2019 - 2/28/2019 3/1/2019 - 3/31/2019 **Compliance Status:** 

Ν Ν

**Compliance Status:** 

## Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0979113	ROCKY GLEN MILL				NTNC	70	Р	GW
Local Address (v	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural	
75 GLEN ROAD	Connections	6						

Towns Served: NEWTOWN

Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte Monitoring Requirement (Summary Type) Operating Limit Samples Req/Month
Chlorine Entry Point Chlorine Residual Monitoring (CHLR) Minimum: 0.2 MG/L Daily

Start Date: 3/1/2006 Compliance History: Operating Limit Monitoring

Compliance History: Operating Limit Monitoring

Monitoring Period Compliance Status: Compliance Status:

4/1/2019 - 4/30/2019

#### **Other Compliance Schedules**

Compliance Schedule Activity Due Date Achieved Date

SUBMIT LEAD CONSUMER NOTICE CERTIFICATE 12/29/2018

CROSS CONNECTION SURVEY REPORT 3/1/2020

	W	ater System Facili	ty and Sampling P	oint Ir	vento	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		EASKIT	EASTERN ACCT KITCHEN	Α	Υ	2	Υ	
		KSRESTAURAN	KIT SNK RESTAURANT	Α	Υ	2	Υ	
		RRLRF1	RR LADY ROOM 1F	Α	Υ	2	Υ	
		RRLRF2	RR LADY RM 2F	Α	Υ	2	Υ	
		RRLRF3	RR LADY RM 3F	Α	Υ	2	Υ	
		RRLRGF	RR LADIES GROUND FLR	Α	Υ	2	Υ	
		RRLRRESTL	RR LADIES RESTRONT L	Α	Υ	2	Υ	
		RRLRRESTR	RR LADIES RESTRONT R	Α	Υ	2	Υ	
		RRMRF1	RR MENS RM 1F	Α	Υ	2	Υ	
		RRMRF2	RR MENS RM 2F	Α	Υ	2	Υ	
		RRMRF3	RR MENS RM 3F	Α	Υ	2	Υ	
		RRMRGF	RR MENS GROUND FLR	Α	Υ	2	Υ	
		TCRLC001	RESTAURANT SINK	Α	Υ	2	Υ	
		TCRLC002	RESTAURANT LADIES R	Α	Υ	2	Υ	
		TCRLC003	SECOND FLOOR LADIES	Α	Υ	2	Υ	
		TCRLC004	FIRST FLOOR LADIES	Α	Υ	2	Υ	
		TCRLC005	THIRD FLOOR LADIES	Α	Υ	2	Υ	Υ
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10477	WELL	2	WELL	Α				
50600	ATMOSPHERIC STORAGE							
50606	PRESSURE STORAGE							
51471	TREATMENT PLANT							
51587	WELL #2	2	WELL 2	Α				<del></del>

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS ID PWS Name			Classification		Population	Owner Type	Primary Source		
СТ0979113	CT0979113 ROCKY GLEN MILL				NTNC	70	Р	GW		
Local Address (v	where applicable)	Service	Resider	ntial	Commercia	al Industri	al Combin	ed Agricultural		
75 GLEN ROAD		Connections	6							

**Certified Operator Information** 

Connecticut Department of Public Health Drinking Water Section

Towns Served: NEWTOWN

Water System Fac	ility: TREAT	TMENT PLA	NT (WSF ID: 51	L471)					
Facility Classification	n: CLASS 1 TF	REATMENT P	LANT						Certification
Operator Name			Operator Type		Certification(s)				Expiration
FOLEY, JAMES CHIEF OPERATOR WATER TREATMENT PLANT OPERATOR - CLASS II							3/31/2020		
			Cont	act Inf	ormation				
Name			Org	ganization				Job Title	:
Mr. Jack R. Bravern	nan		Lyr	nwood Pla	ce, LLC	N	/lanager		
Mailing Address Line One Mailing Addr			Mailing Address	ress Line Two			City State		Zip Code
8000 Midnight Pass Rd						Sarasota		FL	34242
Business Phone	Extension	Fax	Mobile	Phone	Emergency Phone	Fmail Add	ress		

203-803-9301

bravermangroup@yahoo.com

Contact Role(s): Administrative Contact, Legal Contact

#### Please note the following:

203-222-8100

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.

203-682-4598

3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name (				Cla	ssification	Population	Owner Type	Primary Source
CT0979333 HOUSATONIC VALLEY WALDORF SCHOOL - WHITE					NTNC	200	Р	GW
Local Address (v	Service	Residential		Commercia	al Industri	al Combine	ed Agricultural	
1-3 JACKLIN ROAD		Connections	3					

1-3 JACKLIN ROAD	3		
Towns Served: NEWTOWN			
Monitori	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quartei
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quartei
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period		Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		·
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
• •	1/1/20 - 12/31/22		•
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		ı

	Connecticut De	epartment of	Public H	ealth l	Drink	ing W	ater Se	ction	
	Water C	uality Monit	oring and	d Com	oliano	ce Sch	edule		
PWS ID	PWS Name	<i>E</i>	<u>-</u>		Classificat			ner Type Pi	rimary Source
СТ097933	3 HOUSATONIC VALLEY V	VALDORF SCHOOL - V	VHITE		NTNC	-	200	P	GW
Local Add	ress (where applicable)		Service	Residenti	al Comn	nercial I	ndustrial	Combined	Agricultural
1-3 JACKLI	N ROAD		Connections	3					
Towns Ser	ved: NEWTOWN				1	1			
		Monito	oring Requ	iremen	ts				
Water Sy	stem Facility: ENTRY POIN	IT (WSF ID: 00700)							
Organic	Chemicals (VOCS)						1 routine	(RT) per t	three years
Samp	oling Point (Sampling Point ID)	)	1	Monitorin	g Period	Collec	tion Period	Compli	ance Status
ENTR	Y POINT (3)			1/1/17 - 1	2/31/19			Co	mplete
				1/1/20 - 1	2/31/22				
		Other Co	ompliance	Schedu	ıles				
Complian	ce Schedule Activity			D	ue Date		Achieved	Date	
CROSS CO	NNECTION SURVEY REPORT			3/	/1/2019				
	Wate	er System Facili	ty and San	npling F	Point li	nvento	ry		
Water		_				Total	Lead and		
System	Water System Facility	Sampling Point ID		nt		Coliform		Ashastas	Stage 2 DDDD
Facility ID			Description	LCVCTENA	Status		Kule Her	Aspestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4 DOWNSTREAM	DISTRIBUTION		A	Υ			
		KSKBLD1	KITCHENETTE		Α	V	2	V	
		KSOFF	KIT SNK OFFIC	_	A A	Y Y	2 2	Y Y	
		RRBRBLD1	RR BOYS ROO			Υ	2	Ϋ́	
		RRBULD1	RR BUILDING		A A	Υ	2	Ϋ́	
		RRBULD2	RR BUILDING		A	Υ	2	Ϋ́	
		RRGRBLD1	RR GIRLS ROC	_	A	Υ	2	Y	
		RRLOBBYADMN			A	Υ	2	Ϋ́	
		RRLOBBYBDL1			A	Y	2	Ϋ́	
		UPSTREAM	WITHIN 5 SER		A		2	•	
00700	ENTRY POINT	3	ENTRY POINT	VICE COIL	A				
10478	WELL	2	WELL		A				
53127	ATMOSPHERIC TANKS		***************************************						
53129	PRESSURE TANK								
972	WATER TREATMENT								
372	WATER TREATMENT	Contified	Onereter	le forms	tion				
Water Sv	stem Facility: WATER TREA		Operator	intorma	ition				
	assification: CLASS 1 TREATMI		972)						C .:::: .:
-	•	Operator Type	o Ca	ertification	(s)				Certification Expiration
_	Operator Name         Operator Type         Certification(s)           FOLEY, JAMES         CHIEF OPERATOR         WATER TREATMENT PLANT OPERATOR - CLASS II						Δςς ΙΙ	3/31/2020	
, OLL I, JAI	**LU				VILINI F	LANT OF	ENGTON - CI	_ 133 II	3/ 31/ 2020
		Con	tact Inforr	nation					

Housatonic Valley Waldorf Scho

Job Title

State

 $\mathsf{CT}$ 

Zip Code

06470

Pres.Board Directors

City

Newtown

Emergency Phone Email Address

Organization

Mobile Phone

Mailing Address Line Two

Name

Ms. Laura Stotz

40 Dodgingtown Rd

**Business Phone** 

Mailing Address Line One

Extension

Fax

C	Connectic	ut Depa	rtmer	nt of	Public	Health	n Drir	nking	Water	Section	l
	Wat	ter Qua	lity M	onito	oring ar	nd Con	nplia	nce S	Schedul	le	
PWS ID P	WS Name				Clas		Classif	ication	Population	Owner Type	Primary Sour
СТ0979333 Н	IOUSATONIC V	ALLEY WALD	ORF SCHO	OOL - W	- WHITE		NT	NC	200	Р	GW
Local Address (wh	ere applicable)				Service	Resider	ntial Co	mmerci	al Industri	al Combin	ed Agricultur
1-3 JACKLIN ROAD					Connection	s 3					
Towns Served: NE	WTOWN					·	,		,		
Contact Role(s):	Legal Contact										
Name	- <b>0</b>			Org	Organization			Job Title			
Mr. David Demme	ent			Но	usatonic Va	lley Waldr	of Schl	Facilities Manager			
Mailing Address Li	ne One		Mailing A	Address	Line Two			City		State	Zip Code
40 Dodgingtown R	Road							Newto	wn	СТ	06470
Business Phone	Extension	Fax		Mobile	e Phone	Emergenc	y Phone	Email Address			
203-364-1113	105	203-364-	0630					ddemment@waldorfct.org			
Contact Role(s):	Administrative	Contact	·		·						

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department of Public Health Drinking Water Section									
	Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name				ssification	Population	Owner Type	Primary Source		
СТ0979343	7 BERKSHIRE ROAD - NEWTOWN				NTNC	85	Р	GW		
Local Address (v	Service	Residen	tial Commerci		al Industri	al Combine	ed Agricultural			
		Connections			1					

Towns Served: NEWTOWN

Towns Served: NEWTOWN			
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Water System Facility: WELL 1 (WSF ID: 49887)			

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name				ssification	Population	Owner Typ	e Pr	imary Source
СТ0979343	7 BERKSHIRE ROAD - NEWTOWN				NTNC	85	Р		GW
Local Address	(where applicable)	Service	Resider	Residential C		al Industri	al Combine		Agricultural
		Connections			1				
Towns Served: NEWTOWN									

Towns Served. NEW TOWN										
Monitoring Requirements										
Water System Facility: WELL 1 (WSF ID: 49887)										
E. Coli (3014)		1 routi	ine (RT) per quarter							
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>							
WELL 1 (2)	10/1/18 - 12/31/18		Complete							
	1/1/19 - 3/31/19		Complete							
	4/1/19 - 6/30/19									
	7/1/19 - 9/30/19									

Other Compliance Schedules									
Compliance Schedule Activity	Due Date	Achieved Date							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2011								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2016								
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2018								

	Water System Facility and Sampling Point Inventory									
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR		
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	Α						
		BRSTAFF	BREAKROOM STAFF	Α	Υ	1	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α						
		ITR1	INFANTS TODDLER RM 1	Α	Υ	1	Υ			
		ITR2	INFANTS TODDLER RM 2	Α	Υ	1	Υ			
		ITR3	INFANTS TODDLER RM 3	Α	Υ	1	Υ			
		ITR4	INFANTS TODDLER RM 4	Α	Υ	1	Υ			
		PS001	PRESCHOOL 1	Α	Υ	1	Υ			
		PS002	PRESCHOOL 2	Α	Υ	1	Υ			
		UPSTREAM	WITHIN 5 SERVICE CON	Α						
00700	ENTRY POINT	3	ENTRY POINT	Α						
49887	WELL 1	2	WELL 1	Α						
57214	TREATMENT PLANT									

Certified Operator Information									
Water System Facility:	TREATMENT PLANT (WSF ID: 57214)								
Facility Classification: CL	Facility Classification: CLASS 1 TREATMENT PLANT								
Operator Name	Operator Type	Certification(s)	Expiration						
FOLEY, JAMES	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	3/31/2020						

	Water Quality Monitoring and Compliance Schedule									
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source		
СТ0979343	7 BERKSHIRE ROAD - NEWTOWN				NTNC	85	Р	GW		
Local Address (v	Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural			
		Connections			1					

Connecticut Department of Public Health Drinking Water Section

Towns Served: NEWTOWN

			Co	ontact Inf	ormation				
Name				Organization	l			Job Title	
Ms. Maria Sheehan	1			355 Realty, L	LC.		Bookkeeper		
Mailing Address Lin	e One		Mailing Addr	ress Line Two			City	State	Zip Code
P. O. Box 516			6 Trowbridge	e Drive		Bethel		СТ	06801
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ldress		
203-791-4462		203-743-0	0042		203-791-4462	msheeh	an@listservic	es.com	
Contact Role(s): Ac	dministrative	Contact							
Name Organization Job Title									
355 Reality LLC									
Mailing Address Lin	e One		Mailing Addr	ress Line Two		City State Zip Co			Zip Code
7 Berkshire Rd						Newtown CT 06		06470	
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ldress		
Contact Role(s): Le	gal Contact, C	Owner							
Name				Organization	l			Job Title	
Mr. Malcolm McClu	ıskey			355 Reality L	LC		Manageing I	Member	
Mailing Address Lin	e One		Mailing Addr	ress Line Two			City	State	Zip Code
6 Trowbridge Drive						Bethel	ethel CT 06801		06801
Business Phone	Extension	Fax	Mo	obile Phone	Emergency Phone	Email Ad	ldress		
Contact Role(s): Le	gal Contact (	Dwnor							

#### Contact Role(s): Legal Contact, Owner

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health	Drinking	g Water	Section	
Water Quality Monitoring and Con	npliance S	Schedul	e	
DWS Name	Classification	Population	Owner Type	Drimar

PWS ID PWS Name C			Cla	ssification	Population	Owner Type	Primary Source	
CT0979403 TURNBERRY REALTY, LLC				NTNC	123	Р	GW	
Local Address (v	vhere applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
12 TURNBERRY	LANE (LOT11)	Connections			1			

Towns Served: NEWTOWN			
Monitoring	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
	* *		

# Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID PWS Name C			Cla	ssification	Population	Owner Type	Primary Source	
СТ0979403	TURNBERRY REALTY, LLC				NTNC	123	Р	GW
Local Address (w	here applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
12 TURNBERRY I	ANE (LOT11)	Connections			1			

Towns Served: NEWTOWN

Other Co	mpliance Schedules		
Compliance Schedule Activity	Due Date	Achieved Date	_
CROSS CONNECTION SURVEY REPORT	3/1/2020		

	Water System Facility and Sampling Point Inventory								
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		Stage ? DBPR
00600	DISTRIBUTION SYSTEM	001	CAFETERIA SINK	Α	Υ	N			
		002	MAIN MENS ROOM RHS	Α	Υ	N	Υ		
		003	MAIN MENS ROOM LHS	Α	Υ	N	Υ		
		004	FITNESS CENTER MENS	Α	Υ	N			
		005	UPSTAIRS SINK	Α	Υ	N			
		006	UPSTAIRS MEN RM RH	Α	Υ	N			
		007	MAIN LADIES ROOM	Α	Υ	N			
		800	FITNESS LADIES ROOM	Α	Υ	N			
		009	UPSTAIRS LADIES ROOM	Α	Υ	N			
		4	DISTRIBUTION SYSTEM	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
55637	WELL #1	2	WELL #1	Α					
55641	WELL #2	2	WELL #2	Α					
55643	ATMOSPHERIC TANK								
55645	BLADDER STORAGE (WX-350)								

#### **Certified Operator Information**

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL WATER SYSTEM						
Operator Name	Operator Type	Certification(s)	Certification Expiration			
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020			
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020			
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2020			
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020			

			C	ontact Inf	ormation					
Name				Organization			Job Title			
Mr. David Kramer				Member						
Mailing Address Line One Mailing Add				dress Line Two		City		State	Zip Code	
12 Turnberry Ln					Newtow			СТ	06482	
<b>Business Phone</b>	Extension	Fax	N	1obile Phone	Emergency Phone	Email Addre	ess			
718-677-0784	103	718-250-	2278		347-279-2372	david@hilltopm.com				
Contact Role(s): A	dministrative	Contact. Leg	zal Contact.	Owner						

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	Water Quarrey	inomicor mg am	a don	ipiianee i	Jeneau.	10	
PWS ID	PWS Name	Classification	ssification Population		Primary Source		
СТ0979403	TURNBERRY REALTY, LLC		NTNC	123	Р	GW	
Local Address (where applicable)		Service	Resider	ntial Commerc	ial Industr	ial Combin	d Agricultural
12 TURNBERRY LANE (LOT11)		Connections		1			
Towns Comunds	NIT\A/TO\A/NI	·					

### Towns Served: NEWTOWN Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule